	
(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s,	Civ () () ANSWER
	ANSWER
(In the space above enter the full name(s) of the defendant(s)/responder	$\overline{t(s).)}$
I	
ADMISSIONS AND	DENIALS
In this section, state which factual allegations in the complaint y You should refer to the complaint paragraph by paragraph (and same order as the paragraphs and sentences appear in the complo	sentence by sentence within each paragraph), in the
1	
2.	
2	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
<i>y</i>	
10.	

II <u>Defenses</u>

In this section, state any legal theories that, even assuming that what plaintiff has alleged in the complaint is true, do not permit the plaintiff to win the case. Attach additional sheets of paper as necessary.

FIRST DEFENSE:		
SECOND DEFENSE:		
THIRD DEFENSE:		
WHEREFORE d favor of defendant.	efendant asks this Cour	t to dismiss the complaint and enter judgment in
transactions stated in the arise out of the same even you have against third-pa	e complaint, and/or any ts or transactions stated arties (that is, someone a asactions stated in the co	aintiff that arises out of the same events of crossclaims against the other defendants that in this complaint, and/or any third-party claim, not already named in the lawsuit) that arise our omplaint, you should attach additional sheets out the claims. See the Pro Se Manual for a further
I declare under penalty of	perjury that the forego	ing is true and correct.
Signed this day of	, 20	
	Signature of Defenda	unt
	Address	
	Telephone Number	
	Fax Number (if you	have one)

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(In the space above enter the full name(s) of the plaintiff(s	Civ () ()
- against -	AFFIRMATION OF SERVICE
(In the space above enter the full name(s) of the defendant	t(s)/respondent(s).)
	, declare under penalty of perjury that I have
served a copy of the attached	(document you are serving)
(name of person served)	whose address is
	you served document)
(how you served document: For ex	xample - personal delivery, mail, overnight express, etc.)
Dated:,	Signature
${(month)} {(day)} {(year)}$	Address
	City, State
	Zip Code
	Telephone Number

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(In the spa	ce above enter the full na	me(s) of the plaintiff(s)/p	petitioner(s).)	Civ	(_)()
-	- against -			NOTICE OF	APPEARANCE
(In the spa		me(s) of the defendant(s)			
this acti	Please take notice the on, hereby appear <i>p</i> on are to be directed	ro se and that all f	uture corresponde	ence and papers in	, a defendant in connection with
Dated:	(town/city)		Signature o	f Defendant	
			Address	0 7: C. I.	
			Telephone I	& Zip Code Number	
			<u>Fax Numbe</u>	r (if you have one)	

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(In the space above enter the full name(s) of the plaintiff(s)/po	
- against -	
- agamst -	AFFIRMATION OF SERVICE
(In the space above enter the full name(s) of the defendant(s),	
I,	, declare under penalty of perjury that I have
served a copy of the attached	(document you are serving)
upon	whose address is
(name of person served)	
(where you	u served document)
by	
(how you served document: For exam	nple - personal delivery, mail, overnight express, etc.)
Datada	
Dated:,	
, 20	Signature
(month) (day) (year)	Address
	Address
	City, State
	Zip Code
	Telephone Number

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